## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	
	C C00448696
Check if 24-hour report X 48-hour report New report Amends report filed	I on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
U.S. Postal Service	07 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 475 Lenfant Plz SW	Amount
City State Zip Code	800.00
Washington DC 20260-0004	Transaction ID : E3EAE1DD80CF447B5BDE Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Postage  Category/ Type	07
Name of Federal Candidate Support Office	e Sought: House District:
Mike Lee Oppose	President X Senate State: UT
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Senate Conservatives Fund	07 04 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388	Amount
City State Zip Code	111.50
Alexandria VA 22313-0388	Transaction ID : E96B1AE478830475595B Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Donation Processing  Category/ Type	07 04 2015
Name of Federal Candidate Support Offic	e Sought: House District:
Mike Lee Oppose	President X Senate State: UT
Calendar Year-To-Date Per Election for Office Sought  Disb 2016	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	911.50
(b) SUBTOTAL of Unitemized Independent Expenditures	1 4 1 4 1 5
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mount with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Paul Kilgore  [Electronically Filed] Date	09 08 2015
Signature	